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## APPLICANTS

Dale W. Schroeder, Scotts Valley, CA;

\*\* CONTINUING DATA \*\*\*\*\* *NONE JD*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *NONE JD*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 6	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>Jach</i>	Initials <i>JD</i>		

## ADDRESS

AGILENT TECHNOLOGIES, INC.  
 Legal Department, DL 429  
 Intellectual Property Administration  
 P.O. Box 7599  
 Loveland, CO  
 80537-0599

## TITLE

Angled strobe lines for high aspect ratio spatial light modulator

FILING FEE  RECEIVED 806	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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